

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the linesUnited Food and Commercial Workers International Union Working Families Advocacy
Project

ADDRESS (number and street)

1775 K Street, N.W.

Check if different
than previously
reported. (ACC)

Washington

DC

20006

1598

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00484253

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2010

through

07

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anthony M. Perrone

Signature of Treasurer

Electronically Filed by Anthony M. Perrone

Date

08

18

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

United Food and Commercial Workers International Union Working Families Advocacy Project

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 1 0

To:

M M
0 7D D
3 1Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2010		0.00
(b) Cash on Hand at Beginning of Reporting Period	62359.43	
(c) Total Receipts (from Line 19)	0.00	100000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	62359.43	100000.00
7. Total Disbursements (from Line 31)	11333.14	48973.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	51026.29	51026.29
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

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Write or Type Committee Name

United Food and Commercial Workers International Union Working Families Advocacy
Project

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	100000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	100000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	100000.00

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	3498.10	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	3498.10	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	11333.14	45475.61	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11333.14	48973.71	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11333.14	48973.71	

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	3498.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	3498.10

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

United Food and Commercial Workers International Union Working Families Advocacy Project

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 BW Inn and Suites

 Nature of Debt (Purpose):
 Hotel Billing

Mailing Address 5219 Cross Road Parkway

City	State	ZIP Code
Texarkana	AR	71854

Outstanding Balance Beginning This Period

10350.00

Transaction ID: 9403809

Amount Incurred This Period

0.00

Payment This Period

10350.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Alamo Rent a Car

 Nature of Debt (Purpose):
 Car Rental

Mailing Address P. O. Box 198154

City	State	ZIP Code
Atlanta	GA	30384-8154

Outstanding Balance Beginning This Period

983.14

Transaction ID: 9403810

Amount Incurred This Period

0.00

Payment This Period

983.14

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

0.00

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers International Union Working Families Advocacy Project		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484253 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Alamo Rent A Car		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 13</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address P.O. Box 198154		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">378.18</div>	
City State Zip Code Atlanta GA 30384-8154		Transaction ID: 9274125	
Purpose of Expenditure Car Rental-offsets 6/2/10 memo entry		Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BILL HALTER		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u> 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">34520.65</div>	

Full Name (Last, First, Middle, Initial) of Payee Alamo Rent A Car		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 13</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address P.O. Box 198154		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">378.18</div>	
City State Zip Code Atlanta GA 30384-8154		Transaction ID: 9274126	
Purpose of Expenditure Car Rental-offsets 6/2/10 memo entry		Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BLANCHE LINCOLN		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u> 2010	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">34898.83</div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;">756.36</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Anthony M. Perrone

 Signature

Date

M
08

D
18

Y
2010

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 8 / 9

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers International Union Working Families Advocacy Project		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00484253 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 13</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Full Name (Last, First, Middle, Initial) of Payee AMERICAN EXPRESS		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5175.00</div>	
Mailing Address CPC REMITTANCES MAIL CODE A21 POST OFFICE BOX 329000		Transaction ID: 9274131	
City WESTON	State FL	Zip Code 33332-9000	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Purpose of Expenditure BW Inn & Suites-Offs-ets 6/2&6/8/10 memos		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: BILL HALTER		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u> 2010	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">40073.83</div>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 07</div> <div style="border: 1px solid black; padding: 2px;">D 13</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Full Name (Last, First, Middle, Initial) of Payee AMERICAN EXPRESS		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5175.00</div>	
Mailing Address CPC REMITTANCES MAIL CODE A21 POST OFFICE BOX 329000		Transaction ID: 9274132	
City WESTON	State FL	Zip Code 33332-9000	Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Purpose of Expenditure BW Inn & Suites-Offs-ets 6/2&6/8/10 memos		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: BLANCHE LINCOLN		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u> 2010	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">45248.83</div>		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 08</div> <div style="border: 1px solid black; padding: 2px;">D 18</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	

(a) SUBTOTAL of Itemized Independent Expenditures	10350.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Anthony M. Perrone

 Signature

Date

M
08

D
18

Y
2010

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) United Food and Commercial Workers International Union Working Families Advocacy Project		FEC IDENTIFICATION NUMBER C C00484253	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Alamo Rent A Car		Date M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 1 0	
Mailing Address P.O. Box 198154		Amount 113.39	
City State Zip Code Atlanta GA 30384-8154		Transaction ID: 9280535	
Purpose of Expenditure Car Rental-offsets 6/8/10 memo entry		Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BILL HALTER		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u> 2010	
Calendar Year-To-Date Per Election for Office Sought 45362.22			
Full Name (Last, First, Middle, Initial) of Payee Alamo Rent A Car		Date M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 1 0	
Mailing Address P.O. Box 198154		Amount 113.39	
City State Zip Code Atlanta GA 30384-8154		Transaction ID: 9280536	
Purpose of Expenditure Car Rental-offsets 6/8/10 memo entry		Office Sought: <input type="checkbox"/> House State: AR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: BLANCHE LINCOLN		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Runoff</u> 2010	
Calendar Year-To-Date Per Election for Office Sought 45475.61			
(a) SUBTOTAL of Itemized Independent Expenditures		226.78	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures		11333.14	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Anthony M. Perrone Signature		Date M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0	